BEST AVAILABLE COPY

DATENT	APPLICATION	FEE DETERMINATION	RECORD
PAIENI	AFFLICATION	I FEE DE LENIVINATION	NECOND

Effective October 1, 2001

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY			
TOTAL CLAIMS		17				ſ	RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS		minus 20=		* 500			X\$ 9=		OR	X\$18=	•	
INDEPENDENT CLAIMS			3 mir	nus 3 =	* %		Ī	X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT					<u> </u>		Ī	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL	140-10	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL E	NTITY	OR	OTHER SMALL I		
		CLAIMS			HEST	(Ooldinin o)	ſ		ADDI-			ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	. 17	Minus	** &	D	- Ø		X\$ 9=		OR	⊼\$18 =	
AME	Independent	• 3	Minus	***	5	-0		(42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PNDEN	CLAIM			+140=		OR	+280=	
							ı	TOTAL ADDIT. FEE			TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* <i>1</i> 7	Minus	** 0	50	0		X\$ 9=		OR	X\$18=	
AME	Independent	* S	Minus	***	S CLAIM			X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							」 [+140=		OR	+280=	
								TOTAL ADDIT. FEE	·	OR	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3)						
ENTC		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT C	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	ļ ļ	X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	IT CLAIM]					
	tt shammatan to and	mn d in lane the - t	ho onto in acti	ımp ()	to "O" :	olumn 3		+140=		OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or ledges death) is the highest number found in the appropriate box in column 1.											